PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

•			or <u>Fax</u> (57	1)-273-2885			
INSTRUCTIONS: This appropriate. All further indicated unless corrected	form should be used for correspondence including d below or directed other	or transmitting the ISSU g the Patent, advance or crwise in Block 1, by (a)	E FEE and PUBLICAT ders and notification of the specifying a new corre	ION FEE (if requi naintenance fees w spondence address;	red). Blocks I through 5 s ill be mailed to the current and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for	
maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
TOWNSEND AND TOWNSEND AND CREW, LLP TWO EMBARCADERO CENTER EIGHTH FLOOR				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
SAN FRANCIS	Γ	JoAnn Evangelista (Depositors name)					
			5	Menz	Eunsall	(Signature)	
		([Novemb	er 2, 2067	(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	₹	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/721,462	11/22/2000		Adnan Shennib		022176-001500US	3046	
TITLE OF INVENTION	: INTRACANAL CAP F	OR CANAL HEARING	DEVICES				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUR	PREV. PAID ISSU	E FEE TOTAL FEE(S) DU		
nonprovisional	YES	\$720	80	<u>\$</u> 0	\$720	11/07/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
FAULK, DEVONA E 2615			381-325000			end and Townsen	
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, afternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Townsend and Townsend and Townsend or a remove that the name is listed, no name will be printed.				
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI	dess an assignce is ident th in 37 CFR 3.11. Com	A TO BE PRINTED ON illied below, no assignce pletion of this form is NO	data will appear on the FT a substitute for filing a (B) RESIDENCE: (CIT	patent. If an assig n assignment.	COUNTRY)	document has been filed to	
Please check the approp	riate assignee category o	r categories (will not be p	rinted on the patent):	Individual 🖾 🤇	Corporation or other private p	group entity Governmen	
	are submitted: No small entity discount # of Copies	permitted)	 b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 20-1430 (enclose an extra copy of this form). 				
بأخله بسمه السيامي م	utus (from slatus indicatons SMALL ENTITY state	ne Sec 37 CFR 1 27	□ b. Applicant is no l	onger claiming SM/	ALL ENTITY status. See 37	CFR 1.27(g)(2).	
NOTE: The Issue Fee a interest as shown by the	nd Publication Fee of Fre records of the United St	quired) will not be accept ates Patent and Trademar	ed from anyone other thank Office.	n me appneam; a re	granered another of agent, th	r the assignee or other party i	
Authorized Signatur	·			Date 1	November 2, 2007	,	
Typed or printed nar	nc James M.	Heslin, Esq.		Registration	No. <u>29,541</u>		
This collection of informal application. Confide submitting the complet this form and/or suggest Box 1450, Alexandria,	mation is equired by 37 mitality is poverned by 3 ed application form to the stions for reducing this by Yirginia 22313-1450.	CFR 1.311. The informat 5 U.S.C. 122 and 37 CFI WE USPTO. Time will varued, should be sent to to O NOT SEND FEES OR	ion is required to obtain of 1.14. This collection is y depending upon the in he Chief Information Off COMPLETED FORMS	or retain a benefit by estimated to take 1: dividual case. Any ficer, U.S. Patent an TO THIS ADDRE	the public which is to file (2 minutes to complete, inclu comments on the amount of d Trademark Office, U.S. D SS. SEND TO: Commission	and by the USPTO to proces ding gathering, preparing, ar time you require to comple tepartment of Commerce, P.G. ter for Patents, P.O. Box 145	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.